

"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

### January 2004 Topics

- Avian Influenza: Contain, Strengthen and Protect
- Influenza A Fuijan Strain Confirmed in North Dakota
- Chickenpox Reporting Requirements



# Avian Influenza: Contain, Strengthen and Protect

The World Health Organization (WHO) intends to improve global awareness about the spread of avian influenza A (H5N1) virus infections in humans and animals. Objectives the WHO considers as priorities include:

- 1. *Containment* of the outbreak in poultry by identifying affected areas and implementing appropriate control measures.
- 2. Strengthening surveillance to detect H5N1 in humans and poultry.
- 3. *Protecting* those who are at risk of acquiring H5N1 infection health-care workers and those in contact with infected animals.

WHO guidelines for global surveillance aimed at monitoring the spread of avian influenza A (H5N1) virus infection in human and animal populations are available at <a href="https://www.who.int/en/">www.who.int/en/</a>. The guidelines include the case definition of a laboratory-confirmed avian influenza A (H5N1) human infection and provide recommended procedures to monitor changes in transmission patterns and to detect potential human-to-human transmission.

As of Feb. 12, 2004, eight countries have reported to the WHO cases of avian influenza (H5N1) in poultry farms. Of the eight countries, Vietnam and Thailand have reported a total of 23 human cases, of which 18 have died. The Centers for Disease Control and Prevention (CDC) and WHO have not issued travel advisories to the affected countries in East Asia, but do recommend evaluating patients with severe respiratory illness and travel history to H5N1 affected areas fewer than 10 days from onset of symptoms.

Additional information about influenza A (H5N1) in East Asia can be viewed at the CDC website at <a href="www.cdc.gov/flu/about/fluviruses.htm">www.cdc.gov/flu/about/fluviruses.htm</a> or the North Dakota Department of Health flu website at <a href="www.ndflu.com">www.ndflu.com</a>.



### Influenza A Fuijan Strain Confirmed in North Dakota

Influenza A (H3N2) isolates sent to the CDC from the North Dakota Department of Health (NDDoH) were subtyped and found to be the Fuijan strain. The Fuijan strain was a drifted variant of the Influenza A (H3N2) virus that surfaced in the United States early in the 2003-2004 influenza season.

As of Jan. 24, 2004, the NDDoH received 1,623 reported cases of influenza, 71 of which were confirmed as Influenza A (H3N2). Nationally, the CDC has antigenically characterized 81 percent of the Influenza A viruses subtyped as the Fuijan strain. For more information about national influenza test results, read the Jan. 18-24, 2004 CDC Morbidity and Mortality Weekly Report (MMWR), volume 53 (<a href="https://www.cdc.gov/mmwr/preview/mmwrhtml/mm5303a6.htm">www.cdc.gov/mmwr/preview/mmwrhtml/mm5303a6.htm</a>). Information about North Dakota influenza surveillance can be viewed at <a href="https://www.ndflu.com">www.ndflu.com</a>.



#### **Chickenpox Reporting Requirements**

Chickenpox is a mandatory reportable condition in North Dakota. All chickenpox cases should be reported by name, birth date and county to the NDDoH. Cases may be reported online at <a href="https://www.health.state.nd.us/disease/DiseaseCard.htm">www.health.state.nd.us/disease/DiseaseCard.htm</a>.

Surveillance of chickenpox is important to document and monitor the impact of the varicella vaccination program on disease incidence, morbidity and mortality; to evaluate the effectiveness of prevention strategies; and to evaluate vaccine effectiveness under conditions of routine use. Rapid case identification and public health action are important to prevent infection of susceptible people at high-risk for serious complications of varicella, such as immunocompromised individuals and pregnant women

Varicella (chickenpox) vaccine currently is required for children attending early childhood facilities. The vaccine also will be required for entry into kindergarten for the 2004-2005 school year. A reliable history of chickenpox disease is an exemption to the requirement. Reported cases of chickenpox are entered into the North Dakota Immunization Information System (NDIIS). These cases are then added to the vaccination exemption portion of the *Certificate of Immunization*.

Schools, child-care centers and health-care providers are encouraged to report cases of chickenpox. Child-care centers and schools are the most common sites for chickenpox outbreaks. Reporting from schools and child-care centers provides important information to determine if further control measures are needed. Investigations help to determine whether outbreaks are due to the failure of vaccine or the failure to vaccinate. Vaccine effectiveness can be evaluated by comparing rates of disease among vaccinated and unvaccinated individuals in outbreak settings.

Contributing authors of The Pump Handle include Molly Sander, Julie Goplin, Tracy Miller, Kirby Kruger and Larry Shireley. For questions, suggestions or inquiries, or to be removed from the mailing list, please contact Julie Goplin of the Division of Disease Control at 701.238.2375 or by email at jgoplin@state.nd.us.

The pump handle picture in the title was obtained from the website www.ph.ucla.edu/epi/snow.html



# North Dakota Department of Health **Division of Disease Control**

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